

ROC 181

TRAFFIC ACCIDENT REPORT
ILLINOIS STATE POLICE

POLICE ACCIDENT NO

02-92-15

6612738

COUNTY

DUPAGE

Downers Grove

NORTH BOUND I-55

At Intersection with _____ (Number or Name of intersecting Highway or Street)

370 N County Line Rd

DATE OF ACCIDENT 01/08/92

TIME OF ACCIDENT 11:46 PM

DAY OF THE WEEK SAT

MO 10:15 S S S

WITNESSES

1. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

2. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

3. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

4. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

5. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

6. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

7. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

8. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

9. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

10. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

11. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

12. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

13. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

14. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

15. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

16. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

17. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

18. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

19. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

20. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

21. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

22. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

23. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

24. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

25. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

26. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

27. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

28. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

29. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

30. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

31. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

32. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

33. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

34. NAME LAST FIRST TYPE OF REPORT TYPE OF DAMAGE

NOT TO SCALE

Δ

CENTRE MEDICAL

PAVLOV
S.M.O.L.D.E.T.

N. B. T. 55

PAVLE S. MULLINDER

COUNTY AND
RD. DUNDAS

IDENTIFY STREETS AND HIGHWAYS BY NAME AND NUMBER

MAIL 1 ENTERING N.B. 7-65 FROM S.B.

COUNTYLINE RD. UNIT 1 LOST CONTROL

~~SPUN OUT INTO N.B. TRAFFIC AND WAS~~

STREET BROADSIDE BY UNIT. 2 IN

CLAYTON LANE

DRIVER UNIT 2 STATED THAT HE WAS

N.B. I-55 IN THE CENTER, WHEN UNIT 1 CAME FROM IN FRONT

OF A TRUCK IN THE RIGHT LANE. UNIT 1 WAS SPINNING WHEN

IT CAME TO REST IN FRONT OF HIM, CAUSING HIM TO

STRIKE IT BROADSIDE

Created and prepared - 1961 to 1975 by National

8 TYPE OF ACCIDENT		9 TRAFFIC CONTROL		10 ROADWAY DEFECTS	
1. Pedestrian 2. Motor Vehicle in Traffic 3. Personal Motor Vehicle 4. Railroad Train 5. Pedestrian 6. Animal 7. Fire Object 8. Other Object 9. Motorcycle 10. Moped 11. Other		1. Stop Sign at Road Front 2. Stop and Go Light 3. Police Officer's Signal 4. Railroad Crossing Gates 5. R. R. Flagman or Watchman 6. Warning Sign 1/2 Mile Further 7. School School Zone 8. No Ongoing Zone 9. Other 10. No Control		1. Shoulder Lane 2. Shoulder Stop 3. Loose Surface 4. Loose Material 5. Repair Work (Barriering) 6. Repair Work Not Barriering 7. No Control 8. Other	
11 ROAD CHARACTER		12 LIGHT		13 WEATHER	
1. Straight Level 2. Straight on Grade 3. Straight Downhill 4. Curve Level 5. Curve on Grade 6. Curve Hillcrest		1. Daylight 2. Dawn 3. Day 4. Dusk 5. Night 6. Fog 7. Rain 8. Snow 9. Wind 10. Other		1. Dry 2. Damp 3. Snow 4. Ice 5. Fog 6. Other	
15 VEHICLE MANEUVER		16 VEHICLE CONDITION		17 ROADWAY LANES	
1. Going Straight Ahead 2. Passing 3. Making Right Turn 4. Making Left Turn 5. Making U-Turn 6. Stopping or Starting 7. Stopping at Traffic Light 8. Starting from Parked Position 9. Stopped and Starting 10. Parked 11. Backing 12. Changing Lanes 13. Approaching Intersection 14. Approaching Other Vehicles 15. Approaching Pedestrian 16. Approaching Animal 17. Backing Before Starting 18. Stopping After Starting 19. Changing of Position 20. Overcoming Moving Vehicle 21. Other		1. No Obvious Defects 2. Lights Indicate 3. Brake Defective 4. Steering Defective 5. Brakes Defective 6. Horn Not Working 7. Motor Vehicle 8. Other Defect		1. One Lane 2. Two Lanes 3. Three Lanes 4. Four Lanes 5. Five Lanes or More 6. One Lane or More 7. One Lane 8. One Lane	
20 APP PHYS. CONDITION		21 CHEMICAL TEST		23 ALCOHOL TEST RESULTS	
1. Previous Injury, Condition 2. Illness, Temporary 3. Impaired Ability 4. Normal 5. Impaired Ability 6. Impaired Ability 7. Impaired Ability 8. Impaired Ability 9. Impaired Ability 10. Impaired Ability 11. Impaired Ability 12. Impaired Ability 13. Impaired Ability 14. Impaired Ability 15. Impaired Ability 16. Impaired Ability 17. Impaired Ability 18. Impaired Ability 19. Impaired Ability 20. Impaired Ability 21. Impaired Ability 22. Impaired Ability 23. Impaired Ability 24. Impaired Ability		1. Not Observed 2. Not Observed 3. Not Observed 4. Not Observed 5. Not Observed 6. Not Observed 7. Not Observed 8. Not Observed 9. Not Observed 10. Not Observed 11. Not Observed 12. Not Observed 13. Not Observed 14. Not Observed 15. Not Observed 16. Not Observed 17. Not Observed 18. Not Observed 19. Not Observed 20. Not Observed 21. Not Observed 22. Not Observed 23. Not Observed 24. Not Observed		1. Not Observed 2. Not Observed 3. Not Observed 4. Not Observed 5. Not Observed 6. Not Observed 7. Not Observed 8. Not Observed 9. Not Observed 10. Not Observed 11. Not Observed 12. Not Observed 13. Not Observed 14. Not Observed 15. Not Observed 16. Not Observed 17. Not Observed 18. Not Observed 19. Not Observed 20. Not Observed 21. Not Observed 22. Not Observed 23. Not Observed 24. Not Observed	
22 ALCOHOL TEST		24 MISC INFORMATION		25 ALCOHOL TEST RESULTS	
1. Not Observed 2. Not Observed 3. Not Observed 4. Not Observed 5. Not Observed 6. Not Observed 7. Not Observed 8. Not Observed 9. Not Observed 10. Not Observed 11. Not Observed 12. Not Observed 13. Not Observed 14. Not Observed 15. Not Observed 16. Not Observed 17. Not Observed 18. Not Observed 19. Not Observed 20. Not Observed 21. Not Observed 22. Not Observed 23. Not Observed 24. Not Observed		1. Not Observed 2. Not Observed 3. Not Observed 4. Not Observed 5. Not Observed 6. Not Observed 7. Not Observed 8. Not Observed 9. Not Observed 10. Not Observed 11. Not Observed 12. Not Observed 13. Not Observed 14. Not Observed 15. Not Observed 16. Not Observed 17. Not Observed 18. Not Observed 19. Not Observed 20. Not Observed 21. Not Observed 22. Not Observed 23. Not Observed 24. Not Observed		1. Not Observed 2. Not Observed 3. Not Observed 4. Not Observed 5. Not Observed 6. Not Observed 7. Not Observed 8. Not Observed 9. Not Observed 10. Not Observed 11. Not Observed 12. Not Observed 13. Not Observed 14. Not Observed 15. Not Observed 16. Not Observed 17. Not Observed 18. Not Observed 19. Not Observed 20. Not Observed 21. Not Observed 22. Not Observed 23. Not Observed 24. Not Observed	

REC 181
6612738
ILLINOIS STATE POLICE
TRAFFIC ACCIDENT REPORT

NORTH BOUND I-55
 POLICE ACCIDENT NO. **02.92.18**
 COUNTY **DOWNERS GROV**
 DIVISION **DOWNERS GROV**

1. NUMBER OF VEHICLES INVOLVED **2**
 2. DATE OF ACCIDENT **01/08/92**
 3. TIME OF ACCIDENT **11:59 PM**
 4. DAY OF THE WEEK **MON**
 5. MONTH **01**
 6. YEAR **92**

7. DRIVER'S NAME **ROCKWOOD, NATHAN**
 8. DRIVER'S LICENSE NUMBER **02-12738**
 9. DRIVER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 10. DRIVER'S PHONE **708-299-6000**

11. VEHICLE MAKE **FORD**
 12. VEHICLE MODEL **BRONCO**
 13. VEHICLE TYPE **SUV**
 14. VEHICLE COLOR **BROWN**
 15. VEHICLE IDENTIFICATION NO. **1F3P70H18D000000000**
 16. VEHICLE REGISTRATION NO. **02-12738**
 17. VEHICLE REGISTRATION STATE **IL**
 18. VEHICLE REGISTRATION EXPIRATION DATE **01/08/93**

19. VEHICLE OWNER'S NAME **ROCKWOOD, NATHAN**
 20. VEHICLE OWNER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 21. VEHICLE OWNER'S PHONE **708-299-6000**
 22. VEHICLE REMOVED BY **1. DRIVER**
 23. VEHICLE REMOVED TO **2. TOWED AWAY**

24. INSURANCE POLICY HOLDER **ROCKWOOD, NATHAN**
 25. INSURANCE COMPANY **ALLSTATE**
 26. POLICY NUMBER **02-12738**

27. DRIVER'S NAME **ROCKWOOD, NATHAN**
 28. DRIVER'S LICENSE NUMBER **02-12738**
 29. DRIVER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 30. DRIVER'S PHONE **708-299-6000**
 31. DRIVER'S SEX **M**
 32. DRIVER'S AGE **30**
 33. DRIVER'S HEIGHT **5'10"**
 34. DRIVER'S WEIGHT **180**
 35. DRIVER'S EYES **B**
 36. DRIVER'S HAIR **B**
 37. DRIVER'S BLOOD TYPE **O**
 38. DRIVER'S MARITAL STATUS **M**
 39. DRIVER'S OCCUPATION **SALES**
 40. DRIVER'S EMPLOYER **ALLSTATE**
 41. DRIVER'S EMPLOYER ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 42. DRIVER'S EMPLOYER PHONE **708-299-6000**

43. VEHICLE MAKE **FORD**
 44. VEHICLE MODEL **BRONCO**
 45. VEHICLE TYPE **SUV**
 46. VEHICLE COLOR **BROWN**
 47. VEHICLE IDENTIFICATION NO. **1F3P70H18D000000000**
 48. VEHICLE REGISTRATION NO. **02-12738**
 49. VEHICLE REGISTRATION STATE **IL**
 50. VEHICLE REGISTRATION EXPIRATION DATE **01/08/93**

51. VEHICLE OWNER'S NAME **ROCKWOOD, NATHAN**
 52. VEHICLE OWNER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 53. VEHICLE OWNER'S PHONE **708-299-6000**
 54. VEHICLE REMOVED BY **1. DRIVER**
 55. VEHICLE REMOVED TO **2. TOWED AWAY**

56. INSURANCE POLICY HOLDER **ROCKWOOD, NATHAN**
 57. INSURANCE COMPANY **ALLSTATE**
 58. POLICY NUMBER **02-12738**

59. DRIVER'S NAME **ROCKWOOD, NATHAN**
 60. DRIVER'S LICENSE NUMBER **02-12738**
 61. DRIVER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 62. DRIVER'S PHONE **708-299-6000**
 63. DRIVER'S SEX **M**
 64. DRIVER'S AGE **30**
 65. DRIVER'S HEIGHT **5'10"**
 66. DRIVER'S WEIGHT **180**
 67. DRIVER'S EYES **B**
 68. DRIVER'S HAIR **B**
 69. DRIVER'S BLOOD TYPE **O**
 70. DRIVER'S MARITAL STATUS **M**
 71. DRIVER'S OCCUPATION **SALES**
 72. DRIVER'S EMPLOYER **ALLSTATE**
 73. DRIVER'S EMPLOYER ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 74. DRIVER'S EMPLOYER PHONE **708-299-6000**

75. VEHICLE MAKE **FORD**
 76. VEHICLE MODEL **BRONCO**
 77. VEHICLE TYPE **SUV**
 78. VEHICLE COLOR **BROWN**
 79. VEHICLE IDENTIFICATION NO. **1F3P70H18D000000000**
 80. VEHICLE REGISTRATION NO. **02-12738**
 81. VEHICLE REGISTRATION STATE **IL**
 82. VEHICLE REGISTRATION EXPIRATION DATE **01/08/93**

83. VEHICLE OWNER'S NAME **ROCKWOOD, NATHAN**
 84. VEHICLE OWNER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 85. VEHICLE OWNER'S PHONE **708-299-6000**
 86. VEHICLE REMOVED BY **1. DRIVER**
 87. VEHICLE REMOVED TO **2. TOWED AWAY**

88. INSURANCE POLICY HOLDER **ROCKWOOD, NATHAN**
 89. INSURANCE COMPANY **ALLSTATE**
 90. POLICY NUMBER **02-12738**

91. DRIVER'S NAME **ROCKWOOD, NATHAN**
 92. DRIVER'S LICENSE NUMBER **02-12738**
 93. DRIVER'S ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 94. DRIVER'S PHONE **708-299-6000**
 95. DRIVER'S SEX **M**
 96. DRIVER'S AGE **30**
 97. DRIVER'S HEIGHT **5'10"**
 98. DRIVER'S WEIGHT **180**
 99. DRIVER'S EYES **B**
 100. DRIVER'S HAIR **B**
 101. DRIVER'S BLOOD TYPE **O**
 102. DRIVER'S MARITAL STATUS **M**
 103. DRIVER'S OCCUPATION **SALES**
 104. DRIVER'S EMPLOYER **ALLSTATE**
 105. DRIVER'S EMPLOYER ADDRESS **1150 N. 1ST ST. DOWNERS GROV, IL 60130**
 106. DRIVER'S EMPLOYER PHONE **708-299-6000**

1001 USE ONLY

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF REPORT COMPLETED **02/02/92**
 TIME REPORT COMPLETED **11:59 AM**
 DAY REPORT COMPLETED **02**
 MONTH REPORT COMPLETED **02**
 YEAR REPORT COMPLETED **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

1001 USE ONLY

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

1001 USE ONLY

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

DATE OF ACCIDENT **01/08/92**
 TIME OF ACCIDENT **11:59 PM**
 DAY OF THE WEEK **MON**
 MONTH **01**
 YEAR **92**

Show Address, Identifier, and Distance and Direction, where applicable.

Prostate North

8. TYPE OF ACCIDENT		9. TRAFFIC CONTROL		10. ROADWAY DEFECTS	
1. Pedestrian 2. Motor Vehicle in Traffic 3. Parked Motor Vehicle 4. Railroad Train 5. Pedestrian 6. Animal 7. Fixed Object 8. Other Object 9. Motorcycle 10. Moped 11. Other		1. Stop Sign or Red Flasher 2. Stop and Red Light 3. Flashed Officer or Fl. Sign 4. Railroad Crossing Gates 5. Fl. R. Flasher or Flashman 6. Warning Sign or Yellow Flasher 7. Speeded Speed Zone 8. Red Flashing Zone 9. Other 10. No Control		1. Shoulder Low 2. Shoulder Soft 3. Loose Gravel etc. 4. Loose Material 5. Deep Hole Bar/Cutout 6. Repair Work not Bar/Cutout 7. No Object 8. Other	
11. ROAD CHARACTER		12. LIGHT		13. WEATHER	
1. Straight Lane 2. Straight on Curve 3. Straight Through 4. Curve Level 5. Curve on Grade 6. Curve Hillcrest		1. Daylight 2. Dawn 3. Dusk 4. Darkness 5. Raininess 6. Fog 7. Other		1. Clear 2. Parting 3. Snowing 4. Fog 5. Fog Snow 6. Snowing 7. Snowing Dust 8. Blowing Dust	
15. VEHICLE MANEUVER		16. VEHICLE CONDITION		17. ROADWAY LANES	
1. Going Straight Ahead 2. Passing 3. Making Right Turn 4. Making Left Turn 5. Making U Turn 6. Stopping or Stopping 7. Stopping in Traffic Lane 8. Starting from Parked Position 9. Stopped in Traffic 10. Parked 11. Backing 12. Changing Lanes 13. Changing Position 14. Avoiding Other Vehicles 15. Avoiding Other Vehicles 16. Avoiding Animal 17. Avoiding Pedestrian 18. Stopping Before Collision 19. Stopping After Collision 20. Stopping on Shoulder 21. Stopping in Traffic Lane 22. Other		1. No Apparent Defects 2. Lights Diminished 3. Broken Headlight 4. Broken Headlight 5. Broken Headlight 6. Broken Headlight 7. Broken Headlight 8. Broken Headlight 9. Broken Headlight 10. Broken Headlight 11. Broken Headlight 12. Broken Headlight 13. Broken Headlight 14. Broken Headlight 15. Broken Headlight 16. Broken Headlight 17. Broken Headlight 18. Broken Headlight 19. Broken Headlight 20. Broken Headlight 21. Broken Headlight 22. Other		1. One Lane 2. Two Lanes 3. Three Lanes 4. Four Lanes 5. Five Lanes or More 6. One Way 7. Other	
18. VISION OBSCURED		19. PED./PEDALCYCLIST ACTION			
1. Not Obscured 2. Air From Tire or Wheel 3. Tires, Other Barriers 4. Bumper 5. Encumbrance 6. Sign Board 7. Other 8. Pedestrian 9. Pedestrian 10. Pedestrian 11. Pedestrian 12. Pedestrian 13. Pedestrian 14. Pedestrian 15. Pedestrian 16. Pedestrian 17. Pedestrian 18. Pedestrian 19. Pedestrian 20. Pedestrian 21. Pedestrian 22. Other		1. Crossing at Intersection with Signal 2. Crossing at Intersection Against Signal 3. Crossing at Intersection No Signal 4. Crossing at Intersection No Signal 5. Crossing at Intersection No Signal 6. Crossing at Intersection No Signal 7. Crossing at Intersection No Signal 8. Crossing at Intersection No Signal 9. Crossing at Intersection No Signal 10. Crossing at Intersection No Signal 11. Crossing at Intersection No Signal 12. Crossing at Intersection No Signal 13. Crossing at Intersection No Signal 14. Crossing at Intersection No Signal 15. Crossing at Intersection No Signal 16. Crossing at Intersection No Signal 17. Crossing at Intersection No Signal 18. Crossing at Intersection No Signal 19. Crossing at Intersection No Signal 20. Crossing at Intersection No Signal 21. Crossing at Intersection No Signal 22. Other			
20. APP. PHY. CONDITION		21. CHEMICAL TEST			
1. Normal 2. Slight Injury Disability 3. Moderate Injury Disability 4. Severe Injury Disability 5. Permanent Injury Disability 6. Permanent Injury Disability 7. Permanent Injury Disability 8. Permanent Injury Disability 9. Permanent Injury Disability 10. Permanent Injury Disability 11. Permanent Injury Disability 12. Permanent Injury Disability 13. Permanent Injury Disability 14. Permanent Injury Disability 15. Permanent Injury Disability 16. Permanent Injury Disability 17. Permanent Injury Disability 18. Permanent Injury Disability 19. Permanent Injury Disability 20. Permanent Injury Disability 21. Permanent Injury Disability 22. Other		1. Test Passed 2. Test Failed 3. Test Failed 4. Test Failed 5. Test Failed 6. Test Failed 7. Test Failed 8. Test Failed 9. Test Failed 10. Test Failed 11. Test Failed 12. Test Failed 13. Test Failed 14. Test Failed 15. Test Failed 16. Test Failed 17. Test Failed 18. Test Failed 19. Test Failed 20. Test Failed 21. Test Failed 22. Other			
22. ALCOHOL TEST		23. ALCOHOL TEST RESULTS			
1. Test Passed 2. Test Failed 3. Test Failed 4. Test Failed 5. Test Failed 6. Test Failed 7. Test Failed 8. Test Failed 9. Test Failed 10. Test Failed 11. Test Failed 12. Test Failed 13. Test Failed 14. Test Failed 15. Test Failed 16. Test Failed 17. Test Failed 18. Test Failed 19. Test Failed 20. Test Failed 21. Test Failed 22. Other		1. Test Passed 2. Test Failed 3. Test Failed 4. Test Failed 5. Test Failed 6. Test Failed 7. Test Failed 8. Test Failed 9. Test Failed 10. Test Failed 11. Test Failed 12. Test Failed 13. Test Failed 14. Test Failed 15. Test Failed 16. Test Failed 17. Test Failed 18. Test Failed 19. Test Failed 20. Test Failed 21. Test Failed 22. Other			
24. MISC INFORMATION					
1. Traffic Control Sign Visible 2. Traffic Control Sign Visible 3. Traffic Control Sign Visible 4. Traffic Control Sign Visible 5. Traffic Control Sign Visible 6. Traffic Control Sign Visible 7. Traffic Control Sign Visible 8. Traffic Control Sign Visible 9. Traffic Control Sign Visible 10. Traffic Control Sign Visible 11. Traffic Control Sign Visible 12. Traffic Control Sign Visible 13. Traffic Control Sign Visible 14. Traffic Control Sign Visible 15. Traffic Control Sign Visible 16. Traffic Control Sign Visible 17. Traffic Control Sign Visible 18. Traffic Control Sign Visible 19. Traffic Control Sign Visible 20. Traffic Control Sign Visible 21. Traffic Control Sign Visible 22. Other					

Reaching what happened - REFER TO UNITS BY NUMBERS

2